

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

ADDRESS (number and street) 1380 RIO RANCHO BLVD SE PMB 191

Check if different than previously reported. (ACC) RIO RANCHO NM 87124

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00571273

3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2015 through [MM] / [DD] / [YYYY] 06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chris Marston

Signature of Treasurer Chris Marston [Electronically Filed] Date 09 / 29 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="175.00"/>	<input type="text" value="175.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="175.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8419.70"/>	<input type="text" value="8419.70"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="8594.70"/>	<input type="text" value="8594.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6332.32"/>	<input type="text" value="6332.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2262.38"/>	<input type="text" value="2262.38"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2696.16	2696.16
(ii) Unitemized	5669.48	5669.48
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8365.64	8365.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8365.64	8365.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	54.06	54.06
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8419.70	8419.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8419.70	8419.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6332.32	6332.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6332.32	6332.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6332.32	6332.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6332.32	6332.32

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8365.64	8365.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8365.64	8365.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	6332.32	6332.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	54.06	54.06
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	6278.26	6278.26

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Richard Baker
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 972

City Lake Oswego State OR Zip Code 97034

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
 50.00

B. Richard Baker
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 972

City Lake Oswego State OR Zip Code 97034

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2015

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period
 50.00

C. Richard Baker
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 972

City Lake Oswego State OR Zip Code 97034

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Steve Brennan
Full Name (Last, First, Middle Initial)

Mailing Address 21 Sanborn Way

City Brentwood State NH Zip Code 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 06 / 2015

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
25.00

B. Steve Brennan
Full Name (Last, First, Middle Initial)

Mailing Address 21 Sanborn Way

City Brentwood State NH Zip Code 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period
35.00

C. Steve Brennan
Full Name (Last, First, Middle Initial)

Mailing Address 21 Sanborn Way

City Brentwood State NH Zip Code 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2015

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 27
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)
A. Steve Brennan

Mailing Address 21 Sanborn Way

City State Zip Code
Brentwood NH 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2015
Transaction ID : SA11AI.4168

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Steve Brennan

Mailing Address 21 Sanborn Way

City State Zip Code
Brentwood NH 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 01 / 2015
Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Steve Brennan

Mailing Address 21 Sanborn Way

City State Zip Code
Brentwood NH 03833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2015
Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Mary Cole
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Windsor Road
 City Starkville State MS Zip Code 39759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2015
Transaction ID : SA11AI.4172
 Amount of Each Receipt this Period
 100.00

B. Mary Cole
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Windsor Road
 City Starkville State MS Zip Code 39759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11AI.4173
 Amount of Each Receipt this Period
 100.00

c. Mary Cole
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Windsor Road
 City Starkville State MS Zip Code 39759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2015
Transaction ID : SA11AI.4174
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Mary Cole
Full Name (Last, First, Middle Initial)

Mailing Address 102 Windsor Road

City Starkville State MS Zip Code 39759

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
05 / 06 / 2015

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period
100.00

B. Mary Cole
Full Name (Last, First, Middle Initial)

Mailing Address 102 Windsor Road

City Starkville State MS Zip Code 39759

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
06 / 01 / 2015

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period
100.00

C. Gail Daugherty
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Hornbeam Cir. E

City Lafayette State IN Zip Code 47905

FEC ID number of contributing federal political committee. **C**

Name of Employer Transport Corp of America Occupation Transportation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
03 / 29 / 2015

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Suzan Lynn
Full Name (Last, First, Middle Initial)

Mailing Address 945 Kennely Rd. unit I-137

City Saginaw State MI Zip Code 48609

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 16 / 2015
Transaction ID : SA11AI.4191

Amount of Each Receipt this Period 50.00

B. Suzan Lynn
Full Name (Last, First, Middle Initial)

Mailing Address 945 Kennely Rd. unit I-137

City Saginaw State MI Zip Code 48609

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 20 / 2015
Transaction ID : SA11AI.4192

Amount of Each Receipt this Period 50.00

C. Joanne Mayo
Full Name (Last, First, Middle Initial)

Mailing Address 30945 Loma Linda Rd.

City Temecula State CA Zip Code 92592

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.00

Date of Receipt 04 / 07 / 2015
Transaction ID : SA11AI.4198

Amount of Each Receipt this Period 49.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 149.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Joanne Mayo
Full Name (Last, First, Middle Initial)

Mailing Address 30945 Loma Linda Rd.

City Temecula	State CA	Zip Code 92592
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
49.00

B. Joanne Mayo
Full Name (Last, First, Middle Initial)

Mailing Address 30945 Loma Linda Rd.

City Temecula	State CA	Zip Code 92592
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2015

Transaction ID : SA11AI.4200

Amount of Each Receipt this Period
49.00

C. Joanne Mayo
Full Name (Last, First, Middle Initial)

Mailing Address 30945 Loma Linda Rd.

City Temecula	State CA	Zip Code 92592
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2015

Transaction ID : SA11AI.4201

Amount of Each Receipt this Period
-49.00

Chargeback

SUBTOTAL of Receipts This Page (optional).....▶	49.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)
A. Joanne Mayo

Mailing Address 30945 Loma Linda Rd.

City Temecula State CA Zip Code 92592

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2015

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period
49.00

Full Name (Last, First, Middle Initial)
B. Joanne Mayo

Mailing Address 30945 Loma Linda Rd.

City Temecula State CA Zip Code 92592

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period
49.00

Full Name (Last, First, Middle Initial)
C. Richard Oberlander

Mailing Address 158 Sunset Drive

City Hanover State PA Zip Code 17331

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : SA11AI.4206

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **198.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Richard Oberlander
 Full Name (Last, First, Middle Initial)
 Mailing Address 158 Sunset Drive
 City Hanover State PA Zip Code 17331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : SA11AI.4207
 Amount of Each Receipt this Period
 100.00

B. Richard Oberlander
 Full Name (Last, First, Middle Initial)
 Mailing Address 158 Sunset Drive
 City Hanover State PA Zip Code 17331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA11AI.4208
 Amount of Each Receipt this Period
 50.00

C. Richard Oberlander
 Full Name (Last, First, Middle Initial)
 Mailing Address 158 Sunset Drive
 City Hanover State PA Zip Code 17331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11AI.4209
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Karen Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 361 Crooked Creek Ct.
 City Elizabethtown State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : SA11AI.4214
 Amount of Each Receipt this Period
 100.00

B. Karen Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 361 Crooked Creek Ct.
 City Elizabethtown State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11AI.4215
 Amount of Each Receipt this Period
 100.00

C. Karen Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 361 Crooked Creek Ct.
 City Elizabethtown State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2015
Transaction ID : SA11AI.4216
 Amount of Each Receipt this Period
 20.16

SUBTOTAL of Receipts This Page (optional).....▶	220.16
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Karen Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 361 Crooked Creek Ct.

City Elizabethtown State KY Zip Code 42701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.16**

Date of Receipt
05 / 04 / 2015

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period
100.00

B. Karen Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 361 Crooked Creek Ct.

City Elizabethtown State KY Zip Code 42701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **670.16**

Date of Receipt
06 / 01 / 2015

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period
150.00

C. Sharon Russell
Full Name (Last, First, Middle Initial)

Mailing Address 3502 Terrace Way

City Celina State TX Zip Code 75009

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
03 / 16 / 2015

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

A. Karmen Siirtola
Full Name (Last, First, Middle Initial)

Mailing Address 5400 Highland Road

City Mandan State ND Zip Code 58554

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2015
Transaction ID : SA11AI.4224

Amount of Each Receipt this Period 250.00

B. Grant Van Der Jagt
Full Name (Last, First, Middle Initial)

Mailing Address 17736 E. Ida Avenue

City Centennial State CO Zip Code 80015

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 01 / 03 / 2015
Transaction ID : SA11AI.4226

Amount of Each Receipt this Period 210.00

C. Grant Van Der Jagt
Full Name (Last, First, Middle Initial)

Mailing Address 17736 E. Ida Avenue

City Centennial State CO Zip Code 80015

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 01 / 03 / 2015
Transaction ID : SA11AI.4227

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional).....▶	560.00
TOTAL This Period (last page this line number only).....▶	2696.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)

A. Clear Channel Outdoor

Mailing Address 4131 109th St

City Urbandale State IA Zip Code 50322

Purpose of Disbursement
Outdoor Advertising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 16 / 2015

Transaction ID : SB21B.4142

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 03 / 2015

Transaction ID : SB21B.4113

Amount of Each Disbursement this Period

54.06

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 09 / 2015

Transaction ID : SB21B.4114

Amount of Each Disbursement this Period

35.75

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1089.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>17</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02	/	17	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
02	/	17	/	2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4115											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		24.05										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>23</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02	/	23	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
02	/	23	/	2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4116											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		21.86										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>02</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03	/	02	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03	/	02	/	2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4117											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		1.48										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

SUBTOTAL of Disbursements This Page (optional).....▶	47.39
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>09</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		09		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03		09		2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4118											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		15.17										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>16</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		16		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03		16		2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4119											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		5.15										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>23</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		23		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03		23		2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4120											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		22.91										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

SUBTOTAL of Disbursements This Page (optional).....▶	43.23
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2015

Transaction ID : SB21B.4121

Amount of Each Disbursement this Period

13.83

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SB21B.4122

Amount of Each Disbursement this Period

7.85

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	13	/	2015

Transaction ID : SB21B.4123

Amount of Each Disbursement this Period

16.40

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

38.08

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	5

Transaction ID : SB21B.4124

Amount of Each Disbursement this Period

1	0	.	6	3
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	5

Transaction ID : SB21B.4125

Amount of Each Disbursement this Period

1	3	.	7	2
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Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	5

Transaction ID : SB21B.4126

Amount of Each Disbursement this Period

2	0	.	6	3
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4	4	.	9	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>11</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05	/	11	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
05	/	11	/	2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4127											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		10.30										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>26</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05	/	26	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
05	/	26	/	2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4128											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		17.85										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. CMDI		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td>/</td> <td>10</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06	/	10	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06	/	10	/	2015									
Mailing Address 1593 Spring Hill Rd Ste 400		Transaction ID : SB21B.4129											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement CC Processing	Category/Type		17.67										
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												

SUBTOTAL of Disbursements This Page (optional).....▶	45.82
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	22	/	2015

Transaction ID : SB21B.4130

Amount of Each Disbursement this Period

15.20

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 Spring Hill Rd
Ste 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SB21B.4131

Amount of Each Disbursement this Period

8.10

Full Name (Last, First, Middle Initial)

C. Mary Cole

Mailing Address 102 Windsor Road

City Starkville State MS Zip Code 39759

Purpose of Disbursement
Reimbursement (Itemized Below)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	20	/	2015

Transaction ID : SB21B.4144

Amount of Each Disbursement this Period

422.99

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

446.29

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)

A. Neotrope

Mailing Address 4332 W 230th St

City Torrance State CA Zip Code 90505

Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2015

Transaction ID : SB21B.4144.0

Amount of Each Disbursement this Period

422.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Fairway Outdoor Funding

Mailing Address PO Box 60125

City Charleston State SC Zip Code 28260

Purpose of Disbursement
Outdoor Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : SB21B.4138

Amount of Each Disbursement this Period

1028.55

Full Name (Last, First, Middle Initial)

C. Nomadic Genius

Mailing Address 5049 Trouisdale Dr

City Nashville State TN Zip Code 37220

Purpose of Disbursement
Outdoor Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2015

Transaction ID : SB21B.4140

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3428.55

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)

A. North Rock Reports

Mailing Address 45 N Hill Dr
Ste 100

City Warrenton State VA Zip Code 20186

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4104

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Sprint

Mailing Address 6200 Sprint Pkwy

City Overland Park State KS Zip Code 66251

Purpose of Disbursement
Cell Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4135

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Sprint

Mailing Address 6200 Sprint Pkwy

City Overland Park State KS Zip Code 66251

Purpose of Disbursement
Cell Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4136

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POLITICAL EARTHQUAKE PAC/GRASSROOTS4PALIN

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Sprint		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td>/</td> <td>23</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06	/	23	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06	/	23	/	2015									
Mailing Address 6200 Sprint Pkwy		Transaction ID : SB21B.4137											
City Overland Park	State KS	Zip Code 66251	Amount of Each Disbursement this Period										
Purpose of Disbursement Cell Service	Category/Type		69.82										
Candidate Name	Disbursement For:												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General												
State: District:	<input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td>/</td> <td></td> <td>/</td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y		/		/	
M M M	/	D D D	/	Y Y Y Y Y Y									
	/		/										
Mailing Address		Amount of Each Disbursement this Period											
City	State	Zip Code											
Purpose of Disbursement	Category/Type												
Candidate Name	Disbursement For:												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General												
State: District:	<input type="checkbox"/> Other (specify) ▼												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td>/</td> <td></td> <td>/</td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y		/		/	
M M M	/	D D D	/	Y Y Y Y Y Y									
	/		/										
Mailing Address		Amount of Each Disbursement this Period											
City	State	Zip Code											
Purpose of Disbursement	Category/Type												
Candidate Name	Disbursement For:												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General												
State: District:	<input type="checkbox"/> Other (specify) ▼												

SUBTOTAL of Disbursements This Page (optional).....▶	69.82
TOTAL This Period (last page this line number only).....▶	5770.57